2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# P04000011926

Entity Name: EL MARIACHI LOCO MULTISERVICIOS INC.

Current Principal Place of Business:

6320 15TH STREET E SUITE C7
SARASOTA, FL 34243

New Principal Place of Business:

6350 15TH STREET E
SARASOTA, FL 34243

Current Mailing Address:

6320 15TH STREET E SUITE C7
SARASOTA, FL 34243

New Mailing Address:

6350 15TH STREET E
SARASOTA, FL 34243

FEI Number: 58-2682779 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HOLMLUND, ROSALIA
545 MAGELLAN DRIVE
SARASOTA, FL 34243 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HOLMLUND, ROSALIA
Address: 545 MAGELLAN DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: VD ( ) Delete
Name: HOLMLUND, KENNETH J
Address: 545 MAGELLAN DRIVE
City-St-Zip: SARASOTA, FL 34243

Title: TD ( ) Delete
Name: NIETO, JUAN C
Address: 12322 BONCREST DR
City-St-Zip: REISTERSTOWN, MD 21136

Title: SD (X) Delete
Name: CASTILLO, JULIO ROBERTO
Address: 2945 MARES TAIL CIRCLE
City-St-Zip: SARASOTA, FL 34235

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROSALIA HOLMLUND PD 02/05/2007
Electronic Signature of Signing Officer or Director Date